

Arizona Capitol Museum Guild Membership Form

Name: _____

E-mail: _____

Address: _____

Street

City

Zip

Phone

TYPES OF YEARLY MEMBERSHIP

(Please indicate your choice)

☐ *Active Member* (\$20.00)

Volunteers minimum of 12 hours per year, receives Guild News and invitations to Museum Events, receives 20% discount in Museum store.

☐ *Associate Member* (\$20.00)

Seeks to support Museum financially, receives Guild News and invitations to Museum events. No Museum Store Discount and no volunteer hours required.

☐ *Patron* (\$40.00)

Seeks to support Museum financially, receives Guild News and invitations to Museum events. Receives 20% discount in Museum Store, no Volunteer hours required.

I would like to volunteer at the Museum in the following ways:

_____ Serve as Tour Guide

_____ Work in Museum Store

_____ Work on packing artifacts

_____ Help with mailings

_____ Serve as an Officer in the Guild

_____ Answer phones when needed

_____ Work as Greeter at the Museum Entrance

_____ Hours per week I can serve

Mail Completed Form to:
AZ State Capitol Museum Guild
1700 W. Washington Street
Phoenix, AZ 85007